

Prevention and Early Intervention (PEI) RESOURCE MATERIALS

Introduction to the PEI Resource Materials

The PEI Resource Materials list strategies (programs, interventions and approaches) that are likely to meet PEI outcomes desired for addressing PEI Key Community Needs and for PEI Priority Populations. Specifically, the PEI Resource Materials organized in these sections:

PEI Priority Populations:

1. Trauma-Exposed Individuals
2. Individuals Experiencing Onset of Serious Psychiatric Illness
3. Children and Youth in Stressed Families
4. Children and Youth at Risk for School Failure
5. Children and Youth at Risk of Juvenile Justice Involvement

Key PEI Community Needs:

7. Suicide Prevention
8. Reduction of Stigma and Discrimination

The PEI Resource Materials are provided to assist county mental health offices and PEI partners in designing PEI programs and selecting strategies to meet desired PEI outcomes for individuals and families, programs and systems, and communities. It is anticipated that these materials will evolve over time, as additional effective strategies are identified that demonstrate positive outcomes for various populations, including those who have been underserved or inappropriately served as a result of their ethnicity, gender, sexual orientation, age, and other factors.

Selection of Strategies for the PEI Resource Materials

The strategies listed in the PEI Resource Materials meet one of the following definitions:

1. Evidence-based: An evidence-based practice is a strategy that has been or is being evaluated and meets the following two conditions:
 - Has some quantitative and qualitative data showing positive outcomes, but does not yet have enough research or replication to support generalized positive public health outcomes.
 - Has been subject to expert/peer review that has determined that a particular approach or strategy has a significant level of evidence of effectiveness in public health research literature.

[President's New Freedom Commission]

2. Promising practice: Programs and strategies that have some quantitative data showing positive outcomes over a period of time, but do not have enough research or replication to support generalized outcomes. It has an evaluation component/plan in place to move towards demonstration of effectiveness; however, it does not yet have evaluation data available to demonstrate positive outcomes. [The Association of Maternal and Child Health Programs]

Over time, there will be an opportunity to handle more strategies with local results that may not be formally documented at this time, but may currently meet the definition for “community-defined evidence.”

Community-defined evidence: Ensures that the needs of underserved communities are addressed when determining effectiveness. There are efforts at the national level to begin documenting an evidence base that is community-defined and to develop criteria that describes “community-defined evidence.”

[National Network to Eliminate Disparities Latino Work Group]

Most of the strategies appear on reputable lists of evidence-based practices and/or were identified by OAC or its PEI Committee, DMH, CMHDA, other State agencies, local agencies and organizations, and stakeholders through the PEI Stakeholder Workshops or through written correspondence. The strategies are based on the PEI key community mental health needs originally established by the OAC and are intended to engage persons prior to the development of serious mental illness or serious emotional disturbances, or, in the case of early intervention, to alleviate the need for additional mental health treatment and/or to transition to extended mental health treatment. These strategies have the potential to achieve the PEI outcomes noted on the “Draft PEI Logic Model” (RM-4) in these materials. Many are non-proprietary; however, counties may wish to confirm this by using the strategies’ website links provided in the resource materials.

Identification of Outcomes for Selected Strategies

To support the counties in conducting a local evaluation of one PEI Workplan and its strategy(ies), research-based outcomes are listed for selected strategies. These can be found in the table titled: “Strategy Outcomes Across Priority Populations” (RM-2). The strategies listed in this table were specifically selected to provide a varied range of proven programs for each Priority Population. Several of the strategies and outcomes apply to more than one Priority Population. These strategies generally have robust outcomes documented in research studies.

Please direct questions or comments about the PEI Resource Materials to:

nichole.davis@dmh.ca.gov